



10-12-06

PTO/SB/21 (07-06)

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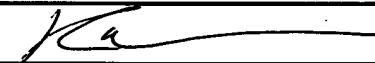
TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/540,803 ✓		
Filing Date	June 23, 2005		
First Named Inventor	Green, Daniel T.		
Art Unit	1654		
Examiner Name	Maury A. Audet		
Total Number of Pages in This Submission	37	Attorney Docket Number	022354-000310US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement (2 pp.)	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Form PTO/SB/08A&B (1 p.) Copies of 2 references (33 pp. total) Transmittal Form (1 p.) Return Postcard
		Remarks
The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

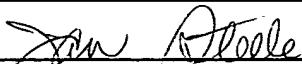
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Randolph Ted Apple		
Date	October 10, 2006	Reg. No.	36,429

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Jan Steele	Date	October 10, 2006

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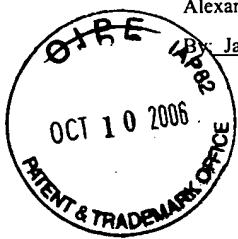
PATENT
Attorney Docket No.: 022354-000310US

I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to:

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

By: Jan Steele

Jan Steele



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Daniel GREEN et al.

Application No.: 10/540,803

Filed: June 23, 2005

For: COMPOSITIONS AND METHODS
FOR THE PREVENTION AND
CONTROL OF INSULIN-INDUCED
HYPOGLYCEMIA

Confirmation No.: 7164

Examiner: Maury A. Audet

Art Unit: 1654

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER
37 CFR §1.97 and §1.98

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR §1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

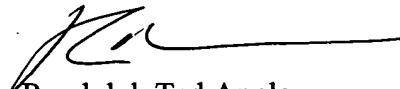
This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

CERTIFICATION

I hereby certify that the references identified as Cite Nos. CA and CB in this Information Disclosure Statement were first cited in a communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.

Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Randolph Ted Apple
Reg. No. 36,429

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Substitute for form 1449A&B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet	1	of	1	Attorney Docket Number	022354-000310US
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Complete if Known

Application Number	10/540,803
Filing Date	June 23, 2005
First Named Inventor	Green, Daniel T.
Art Unit	1654
Examiner Name	Maury A. Audet

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (<i>if known</i>)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
CA	US-5,234,906		08-10-1993	Young et al.	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ³
		Country Code ³	Number ⁴	Kind Code ⁵ (<i>if known</i>)				
CB	WO	01/54742	A1		08-02-2001	Adjei et al.		<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T ²
					<input type="checkbox"/>

Examiner Signature		Date Considered
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¹EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

²Applicant's unique citation designation number (optional). ³Applicant is to place a check mark here if English language Translation is attached.